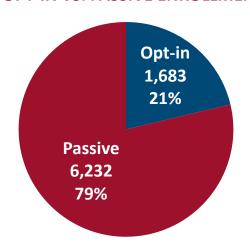
June 2017 Active Enrollments

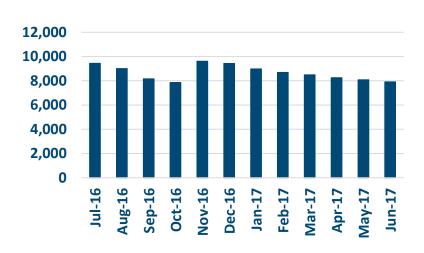


Enrollment Breakdown by Source

OPT-IN VS. PASSIVE ENROLLMENTS



TOTAL ENROLLMENT BY MONTH*



June Active Enrollments 7,915

May Active Enrollments 8,087

Monthly Enrollment Change -2%

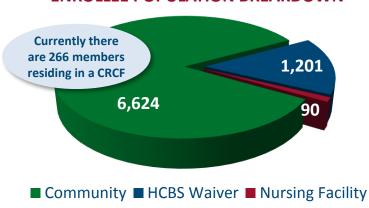
Nursing Facility Usage and Enrollee Demographics

NURSING FACILITY UTILIZATION

Type of Stay	Total
Non-Custodial**	66
Custodial	90
Total	156

^{**} Portions of this chart are self-reported MMP data.

ENROLLEE POPULATION BREAKDOWN



Passive Enrollment 2017 is Underway!

Eligible beneficiaries are being enrolled monthly. 60-day notices were sent May 19th with enrollment details for beneficiaries with the earliest effective dates of August 1, 2017.

On May 17, 2017, CMS sent a notice to remind providers that they should not influence patient choice of a health plan. Click here for a copy of the Beneficiary Choice Notice for Providers.

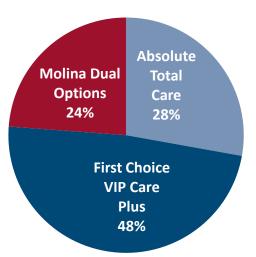
^{*} Coverage for Wave 1 passive enrollees started on April 1, 2016 and coverage for Wave 2 passive enrollees started on July 1, 2016 Sources: SCDHHS Medicaid Management Information System, CMS Monthly Full Enrollment Data File (Updated June 2017)

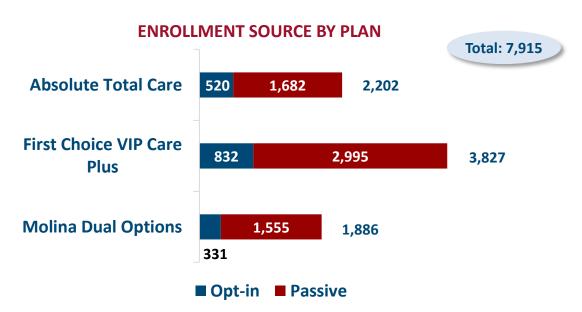
June 2017 Active Enrollments



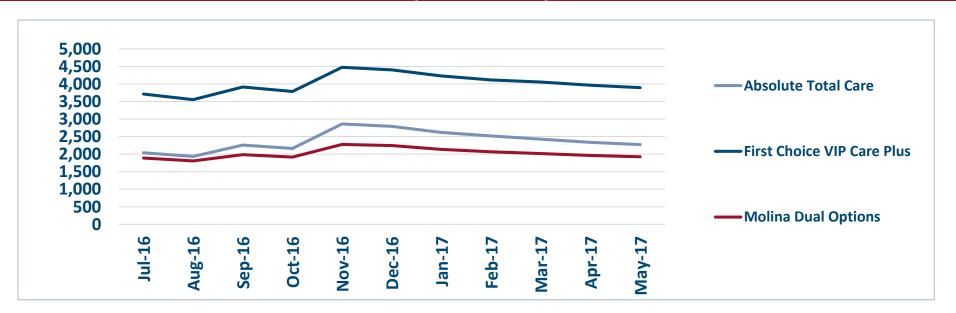
Enrollment by Plan

ENROLLMENT PERCENTAGE BY PLAN



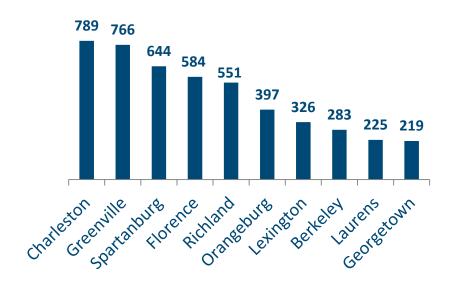


Monthly Enrollment By Plan

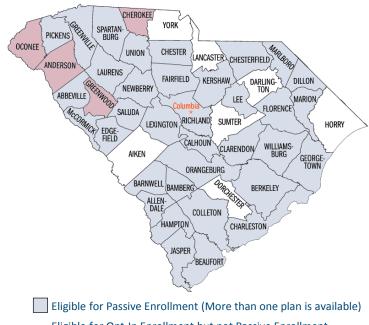


June **Healthy Connections Prime Active Enrollment Absolute Total** First Choice VIP Care **Molina Dual Options County Total** County Care Plus Abbeville Aiken Allendale Anderson Bamberg Barnwell Beaufort Berkeley Calhoun Charleston Cherokee Chester Chesterfield Clarendon Colleton Darlington Dillon Dorchester Edgefield Fairfield Florence Georgetown Greenville Greenwood Hampton Horry Jasper Kershaw Lancaster Laurens Lee Lexington McCormick Marion Marlboro Newberry n n Oconee Orangeburg Pickens Richland Saluda Spartanburg Sumter Union Williamsburg York Total 2.202 3.827 1.886 7.915

TOP 10 COUNTIES BY ENROLLMENT



HEALTHY CONNECTIONS PRIME COUNTY PARTICIPATION



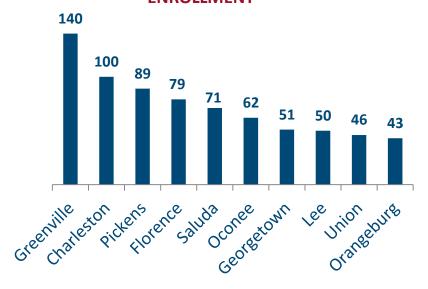
- Eligible for Opt-In Enrollment but not Passive Enrollment (Only one plan is available)
- Healthy Connections Prime is not yet available

Healthy Connections Prime HCBS Waiver Enrollment

June
2017

County Abbeville Aiken Allendale	Absolute Total Care 7 0 0	First Choice VIP Care Plus 10 0	Molina Dual Options	County Total
Aiken Allendale	0		0	
Allendale	0	n	O	17
		9	0	0
		4	4	8
Anderson	0	38	0	38
Bamberg	7	3	6	16
Barnwell	3	3	0	6
Beaufort	6	5	0	11
Berkeley	17	18	0	35
Calhoun	2	0	4	6
Charleston	29	40	31	100
Cherokee	0	15	0	15
Chester	8	6	8	22
Chesterfield	0	7	4	11
Clarendon	10	28	0	38
Colleton	7	6	1	14
Darlington	0	0	0	0
Dillon	3	10	2	15
Dorchester	0	0	0	0
Edgefield	0	5	4	9
Fairfield	6	11	8	25
Florence	19	30	30	79
Georgetown	31	20	0	51
Greenville	49	49	42	140
Greenwood	4	6	0	10
Hampton	0	0	0	0
Horry	4	0	0	4
Jasper	2	9	11	22
Kershaw	0	0	0	0
Lancaster	12	13	7	32
Laurens	4	5	6	15
Lee	8	25	17	50
Lexington	10	9	14	33
Marion	7	6	1	14
Marlboro	2	1	1	4
McCormick	3	11	6	20
Newberry	0	18	0	18
Oconee	29	33	0	62
Orangeburg	17	26	0	43
Pickens	24	40	25	89
Richland	2	1	2	5
Saluda	17	54	0	71
Spartanburg	0	0	0	0
Sumter	1	4	2	7
Union	15	18	13	46
Williamsburg	0	0	0	0
York	0	0	0	0
Total	365	587	249	1,201

CURRENT TOP 10 COUNTIES BY WAIVER ENROLLMENT



HCBS WAIVER UTILIZATION

Waiver Service	Total
Community Choices	1,182
HIV/AIDS	17
Mechanical Ventilator Dependent	2
Total	1,201

Glossary of Key Terms

- Active Enrollment: Members with active coverage under Healthy Connections Prime. This does not include individuals who are enrolled but whose coverage has not started yet.
- Cancellation: A request by an individual to be removed from the program before the coverage effective date. For example: An individual has been passively enrolled into a Medicare-Medicaid Plan but they ask to leave the program before the coverage effective date. This request will delete the enrollment from all enrollment systems. This would be considered a cancellation.
- Community: At home or in a community-based setting, such as a Community Residential Care Facility (CRCF). Not in a nursing facility.
- Community Residential Care Facility (CRCF): CRCFs offer room and board and, unlike boarding homes, provide a degree of personal care for a period in excess of 24 consecutive hours for 2 or more persons, 18 years old or older.
- Custodial Stay: Member's stay in a nursing facility under an approved Medicaid Long Term Care Stay, and not for temporary rehabilitation.
- **Disenrollment:** A request by an individual to be removed from the program **after** the coverage effective date. For example: An individual has opted into a Medicare-Medicaid Plan but they ask to leave the program after the coverage effective date. This request will end the current enrollment coverage at the end of the month it is submitted. This would be considered a disenrollment.
- Home and Community Based Services (HCBS) Waiver: HCBS waivers provide services and supports for persons eligible for nursing home care stay longer in the community (home and community-based settings). Examples of such services and supports are: assistance getting dressed, home delivered meals, and wheelchair ramps. HCBS are offered through one of three waivers: Community Choices, HIV/AIDS, and Mechanical Ventilator Dependent. Plans may also offer these services to non-waiver participants based on medical need.

- Non-Custodial Stay: A member's stay in a nursing facility for temporary rehabilitation and not for long term care.
- Opt-in Enrollment: A request by an eligible individual to actively join a Medicare-Medicaid Plan.
- Opt-out: A request by an individual to affirmatively decline passive enrollment into the Healthy Connections Prime program. Once an individual has opted out, the State must document this and exclude him/her from future passive enrollment processing. There are three scenarios where opt-out requests can be received:
- The individual opts-in or is passively enrolled, and then opts out before the enrollment effective date. The State must cancel the enrollment along with opting the individual out of the program.
- The individual opts-in or is passively enrolled, and then opts out on or after the enrollment effective date. The State must disenroll the individual along with opting the individual out of the program.
- An individual has not opted-in to the program and he/she has not been passively enrolled but he/she requests to opt-out. The State must opt the individual out of passive enrollment into the program.
- Plan for an eligible individual who has not actively chosen to join the program. Please note that if an individual does not take action to end their coverage, their membership in the program will be considered voluntary.
- Plan: A Medicare-Medicaid Plan (MMP) that is offering coverage under Healthy Connections Prime.

For More Information

Please visit our website at http://www.scdhhs.gov/prime or call the SC Thrive Customer Service Center at (800) 726-8774, Monday-Friday, 8:30 a.m. – 5 p.m. TTY users call 711. This call is free.